

AMENDMENT TRANSMITTAL LETTER			CLIENT-MATTER NO.:					
			66671-024 (P SC 5692)					
SERIAL NO:	FILING DATE:	EXAMIN	NER:	GROUP ART UNIT:	1635			
09/781,592	February 12, 2001	Whitema	n, B. A.	CONFIRMATION NO.:	1304			
INVENTION:	METHOD OF REGULATING TRANSCRIPTION IN A CELL							

Mail Stop AF COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450 CERTIFICATE OF MAILING BY "EXPRESS MAIL"

"EXPRESS MAIL" MAILING LABEL NUMBER: EV 400 551 636 US
DATE OF DEPOSIT: APRIL 8, 2004

I HEREBY CERTIFY THAT THIS PAPER OR FEE IS BEING DEPOSITED WITH THE UNITED
STATES POSTAL SERVICE "EXPRESS MAIL POST OFFICE TO ADDRESSEE" SERVICE UNDER
37 CFR 1.10 ON THE DATE INDICATED ABOVE AND IS ADDRESSED TO COMMISSIONER FOR
PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450.

PRINTED NAME OF PERSON MAILING PAPER OR FEE: Paul Choi

SIGNATURE OF PERSON MAILING PAPER OR FEE

Transmitted herewith is a Notice of Appeal From the Examiner to the Board of Patent Appeals and Interferences in the above-identified application.

$\boxtimes$	Small Entity status of this application has been established under 37 CFR 1.27
$\boxtimes$	Petition for Extension of Time is enclosed (in duplicate).
	Terminal Disclaimer with fee under 37 C.F.R. 1.20(d) is enclosed.
$\boxtimes$	No additional claims fee is required.
	An additional claims fee is required and has been calculated as shown below:

## **CLAIMS AS AMENDED**

	NUMBER AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR		RATE			FEE			
	AMENDMENT					MALL NTITY	_	THER NTITY		SMALL ENTITY	OTHER ENTITY
TOTAL CLAIMS	47	=	51	х	\$	9.00	\$	18.00	=	S	\$
INDEPENDENT CLAIMS	2	=	3	х	\$	43.00	\$	86.00	=	\$	S
FIRST PRESENTATION OF MULTIPLE DEPENDENT \$ 145.00 \$ 290 CLAIMS: YES X NO						290.00		\$	\$		
TOTAL ADDITIONAL FEE							\$	\$			

- \* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.
- \*\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.
- If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 0, write "0" in the space.
- Please charge my Deposit Account No. 502624 the amount of \$640.00, \$475.0 which covers the fee for a three-month extension of time, and \$165.00 which covers the notice of appeal fee. A duplicate copy of this sheet is enclosed.
- The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No. 502624. A duplicate copy of this sheet is enclosed.

Inventor(s):

Beverly M. Emerson

Serial No.:

09/781,592

Filed:

February 12, 2001

Page 2

 $\boxtimes$ 

The Commissioner is hereby authorized to charge to Deposit Account No. 502624 any fees under 37 CFR 1.17 which may be required under 37 CFR 1.136(a)(3) for an extension of time in any concurrent or future reply requiring a petition for extension of time. A duplicate copy of this sheet is enclosed.

Dated: April 8, 2004

Respectfully submit

Astrid R. Spain

Registration No. 47,956

McDERMOTT, WILL & FAR 4370 La Jolla Village Drive, Suin

San Diego, California 92122

Telephone: 858-535-9001